# State of Alaska FY2008 Governor's Operating Budget

Department of Health and Social Services
AK Mental Health & Alcohol & Drug Abuse Boards
Component Budget Summary

### **Component: AK Mental Health & Alcohol & Drug Abuse Boards**

#### **Contribution to Department's Mission**

Advisory Board on Alcohol and Drug Abuse (ABADA) and Alaska Mental Health Board's (AMHB) Joint Vision: Alaskans Living Healthy and Productive Lives.

ABADA: In partnership with the public, the Advisory Board on Alcoholism and Drug Abuse plans and advocates for policies, programs, and services that help Alaskans achieve healthy and productive lives, free from the devastating effects of the abuse of alcohol and other substances.

AMHB: Ensure an integrated, comprehensive mental health program for persons with mental disorders in Alaska. The Board is the state planning and coordinating agency for the purpose of federal and state laws relating to the mental health program for the state. The Board is also tasked with evaluating the effectiveness of the program. The Board also provides advocacy for Alaskans with mental disorders.

#### **Core Services**

#### ADVISORY BOARD ON ALCOHOL AND DRUG ABUSE

State statute requires that the Board:

- Act in an advisory capacity to the legislature, the governor, and state agencies in the following matters:
  - 1. special problems affecting mental health that alcoholism or drug abuse may present;
  - 2. educational research and public informational activities in respect to the problems presented by alcoholism or drug abuse;
  - 3. social problems that affect rehabilitation of alcoholics and drug abusers;
  - 4. legal processes that affect the treatment and rehabilitation of alcoholics and drug abusers;
  - 5. development of programs of prevention, treatment, and rehabilitation for alcoholics and drug abusers; and
  - 6. evaluation of effectiveness of alcoholism and drug abuse programs in the state;
- Provide to the Alaska Mental Health Trust Authority for its review and consideration recommendations
  concerning the integrated comprehensive mental health program for chronic alcoholics, and concerning the use
  of money in the mental health trust settlement income account.
- Act as planning and coordinating body for purposes of federal and state laws relating to alcohol, drug, and other substance abuse prevention and treatment services.
- Prepare and maintain a comprehensive plan of services for the prevention and treatment of alcohol, drug, and other substance abuse.

#### **AMHB**

By State statute, the Board:

Is the state planning and coordinating agency for the purposes of federal and state laws relating to the mental health program of the state. The purpose of the board is to assist the state in ensuring an integrated comprehensive mental health program. At least half of the members of the Alaska Mental Health Board must be people with a mental disorder or members of their family. On behalf of persons with mental disorders, the Board shall:

- Prepare and maintain a comprehensive plan of treatment and rehabilitation services;
- Propose an annual implementation plan consistent with the comprehensive plan and with due regard for the findings from evaluation of existing programs;
- Provide a public forum for the discussion of issues related to the mental health services for which the board has planning and coordinating responsibility;
- Advocate the needs of persons with mental disorders before the governor, executive agencies, the legislature, and the public:
- Advise the legislature, the governor, the Alaska Mental Health Trust Authority, and other state agencies in matters affecting persons with mental disorders, including, but not limited to:
  - (A) development of necessary services for diagnosis, treatment, and rehabilitation;
  - (B) evaluation of the effectiveness of programs in the state for diagnosis, treatment, and rehabilitation;
  - (C) legal processes that affect screening, diagnosis, treatment, and rehabilitation;
- Provide to the Alaska Mental Health Trust Authority for its review and consideration recommendations

concerning the integrated comprehensive mental health program for those persons who are mentally ill or determined to need mental health services by the legislature and the use of money in the mental health trust settlement income account; and

• Submit periodic reports regarding its planning, evaluation, advocacy, and other activities.

#### Other duties of the Boards include the following:

- Prepare the ABADA/AMHB shared plan identifying behavioral health prevention and treatment needs of all Alaskans and advocate for a program that meets these needs; Assist individuals with mental health and substance abuse problems to speak out for themselves and their communities in advocating for legislation and program delivery;
- Identify long term sustainable funding mechanisms for behavioral health programs;
- Assure the programs are guided by the assertion that recovery and improvement are possible for all Board beneficiaries.

FY2008 Resources Allocated to Achieve Results				
FY2008 Component Budget: \$1,019,300	Personnel: Full time	7		
	Part time	0		
	Total	7		

#### **Key Component Challenges**

- Provide information to the new administration and legislature regarding the needs of persons represented by our boards and offer recommendations for change.
- Advocate for sustainable behavioral health program funding within GF/MH that funds services to match the needs identified in the Board plan.
- Work to increase coordination and collaboration between the Department of Health and Social Services, the Boards and Commissions, other departments, and their related boards to improve the behavioral health of all Alaskans.
- Finalize and implement the ABADA and AMHB Shared Plan, using it as a tool to advocate for comprehensive, long term solutions to behavioral health needs.
- With the Department and the Trust, ensure the implementation and maintenance of the AKAIMS and Outcomes Identification and Systems Performance Project (OISPP); ensure that this data is used to track program effectiveness and to respond to reporting requirements.
- Advocate for sufficient funding to assure strong administrative support for program efforts from the Division of Behavioral Health and the Department of Health and Social Services.
- Restore quality assurance activities and processes designed to evaluate and improve the quality of services in both outpatient and inpatient settings and that focus on consumer, family, and community needs in addition to assessing regulatory and records compliance.
- Continue to work to develop a more consumer-centered mental health system including promoting greater consumer involvement and leadership in state-level and program-level policy and planning processes.
- Identify the cost savings that result from prevention, early intervention, recovery oriented programs, and services delivered in the least restrictive setting.
- In partnership with the Trust and other Boards, administer, evaluate and implement recommendations from the Medicaid Study looking at the impact of different service and funding scenarios on Board beneficiaries.
- Assess the effectiveness of current funding mechanisms and the resulting program paradigms, and advocate for funding models that balance fiscal sustainability with effective service delivery.
- Continue to assure that the two Boards and their joint staff succeed in representing the unique needs of their two constituent groups while working together to serve the broader behavioral health needs of those with co-occurring mental health and substance abuse disorders and of all Alaskans.
- Continue to address the issues raised by the Department's reorganization and integration of services, placing emphasis on assessing outcomes and impact on service recipients and communities.
- Identify appropriate GF/MH funding for the Boards to perform their statutory roles.

#### ABADA specific:

- Monitor the alignment of service delivery to high-risk target populations with the capacity necessary to provide treatment. This requires waitlist reduction for chronic alcoholics, persons with co-occurring disorders, HIV, pregnant women, women with children, youth and adolescents both in and out of the juvenile justice system.
- Participate in the development of legislation that addresses modification of Alcohol Tax allocation language.

#### AMHB specific:

- Monitor the alignment of service delivery to high-risk target populations with the capacity necessary to provide treatment. This requires waitlist reduction for children, adolescents and adults with mental illness and cooccurring disorders.
- With Alaska Psychiatric Institute's downsizing ensure adequate community services are available to beneficiaries.

#### Significant Changes in Results to be Delivered in FY2008

- The Boards will use the results of the Medicaid study to address the best service mix to maximize fiscal and programmatic effectiveness.
- The renewed Boards will advocate for sufficient funding to assure a range of behavioral health services serving the prevention, treatment, and recovery needs of Alaskans.

#### **Major Component Accomplishments in 2006**

- The Advisory Board on Alcohol and Drug Abuse (ABADA) and the Alaska Mental Health Board (AMHB) met with
  consumers around the state and solicited program proposals from provider organizations. This was used to
  identify service gaps and advocate for appropriate funding of behavioral health programs using both Trust and
  GF/MH dollars.
- With the hiring of the advocacy coordinator, ABADA and AMHB organized an effective advocacy campaign. As a result of the work of the Boards, the Trust, and other beneficiary groups, HB 105, which added Medicaid adult dental services to Alaska's optional services, passed both the House and Senate unanimously.
- ABADA and AMHB completed their staff merger, hiring a new Advocacy Coordinator and a Research Analyst III, to work with both boards.
- ABADA and AMHB were able to identify a structure that lets them share meetings, represent their unique constituencies, and combine funding while retaining the ability to also show individual board expenditures.
- ABADA and AMHB continued to coordinate and assist in the development of an integrated behavioral health
  care system for Alaskans with co-occurring substance use disorders and mental illness. They facilitated the
  continued implementation of the Behavioral Health Community Planning Project that provides multi-disciplinary
  support to communities as they move towards integrating mental health and substance abuse services at the
  local level.
- ABADA and AMHB participated in the continued development, planning and implementation of the Alaska Mental Health Trust Authority's Focus Areas (Housing; Bring the Kids Home; Justice; Trust Beneficiary Group Initiatives; and Workforce Development) and the Request for Recommendations process for the FY08-09 budget.
- ABADA and AMHB worked with consumer representatives to begin to determine the best structure for review of Alaska Psychiatric Institute grievance policies.
- ABADA and AMHB worked with Department of Corrections, DHSS, and community providers to identify and advocate for appropriate programs to divert beneficiaries from API into community programs.

#### ABADA specific:

ABADA continued to provide leadership in collaborative initiatives that seek to reduce the effects of alcohol and other drug abuse including working with a broad range of state departments and divisions to raise public and policymaker awareness to reduce stigma and to decriminalize the self-destructive behaviors of Alaskans who are affected by alcoholism and drub abuse.

AMHB specific:

AMHB continued to provide leadership in collaborative initiatives that seek to reduce the effects of mental illness including working with a broad range of state departments and divisions to raise public and policymaker awareness to reduce stigma and to decriminalize the self-destructive behaviors of Alaskans who are experience a mental illness.

#### **Statutory and Regulatory Authority**

ABADA:

AS 47.30.470-500 Welfare, Social Services & Institutions, Mental Health

AS 47.37 Welfare, Social Services & Institutions, Uniform Alcoholism and Intoxication Treatment Act

AS 44.29.100 Advisory board on alcoholism and drug abuse.

AMHB:

AS 47.30.661-666 Welfare, Social Services & Institutions, Mental Health, Alaska Mental Health Board

#### **Contact Information**

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76.8

53.2

414.9

386.4

931.3

#### **AK Mental Health & Alcohol & Drug Abuse Boards Component Financial Summary** All dollars shown in thousands FY2006 Actuals FY2007 FY2008 Governor **Management Plan** Non-Formula Program: **Component Expenditures:** 71000 Personal Services 313.5 595.6 678.1 129.2 66.0 66.0 230.8 236.3 78.1 74000 Commodities 39.7 31.9 31.9 75000 Capital Outlay 0.0 7.0 7.0 77000 Grants. Benefits 0.0 0.0 0.0 78000 Miscellaneous 0.0 0.0 0.0 **Expenditure Totals** 560.5 1,019.3 931.3

20.1

50.1

293.4

196.9

560.5

Estimated Revenue Collections				
Description	Master Revenue Account	FY2006 Actuals	FY2007 Manageme nt Plan	FY2008 Governor
Unrestricted Revenues None.		0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0
Restricted Revenues Federal Receipts Interagency Receipts	51010 51015	20.1 50.1	76.8 53.2	86.8 45.0
Restricted Total Total Estimated Revenues		70.2 70.2	130.0 130.0	131.8 131.8

86.8

45.0

481.4

406.1

1,019.3

72000 Travel

73000 Services

**Funding Sources:** 1002 Federal Receipts

1007 Inter-Agency Receipts

**Authorized Receipts** 

**Funding Totals** 

1037 General Fund / Mental Health

1092 Mental Health Trust Authority

## Summary of Component Budget Changes From FY2007 Management Plan to FY2008 Governor

All dollars shown in thousands

	General Funds	Federal Funds	Other Funds	Total Funds
FY2007 Management Plan	414.9	76.8	439.6	931.3
Adjustments which will continue				
current level of service: -FY 08 Health Insurance Increases for Exempt Employees	0.1	0.1	0.0	0.2
-Fund Source Adjustment for Retirement Systems Increases	14.4	0.0	-14.4	0.0
Proposed budget decreases:				
-Reduce Uncollectible Interagency Receipts	0.0	0.0	-14.2	-14.2
Proposed budget increases:				
-Joint Board Support	0.0	0.0	19.7	19.7
-FY 08 Retirement Systems Rate Increases	52.0	9.9	20.4	82.3
FY2008 Governor	481.4	86.8	451.1	1,019.3

AK Mental Health & Alcohol & Drug Abuse Boards Personal Services Information					
	Authorized Positions		Personal Services Costs		
	FY2007				
	<b>Management</b>	FY2008			
	<u>Plan</u>	Governor	Annual Salaries	378,738	
Full-time	7	7	Premium Pay	4,804	
Part-time	0	0	Annual Benefits	299,174	
Nonpermanent	0	0	Less 0.68% Vacancy Factor	(4,616)	
			Lump Sum Premium Pay	Ó	
Totals	7	7	Total Personal Services	678,100	

Position Classification Summary						
Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total	
Administrative Assistant	0	0	1	0	1	
Administrative Clerk II	0	0	1	0	1	
Executive Director, Dhss Boards	0	0	1	0	1	
Hith & Soc Svcs Pinr II	0	0	2	0	2	
Prog Coordinator	0	0	1	0	1	
Research Analyst III	0	0	1	0	1	
Totals	0	0	7	0	7	